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3774 7500 12/01/2005

WILLIAMS, MORGAN & AMERSON
10333 RICHMOND, SUITE 1100
HOUSTON, TX 77042

03/07/2006 HDEMESS2 00000034 501629 10705704

01 FC:1501 1400.00 DA
02 FC:1504 300.00 DA
03 FC:8001 30.00 DA

APPLN. NO./DOCKET NO.	FEILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10705704	11/10/2003	Nathan E. Stacy	2039.017800	5242

TITLE OF INVENTION: MONOVINYLARENENE CONJUGATED DIENE COPOLYMERS HAVING LOWER GLASS TRANSITION TEMPERATURES

10705704

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEES DUE	DATE DUE
nonprovisional	NO	\$1400	\$500	\$1700	03/20/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
TRUSKIN, FRED M	1715	525-314000			

1. Change of correspondence address or indication of "Fee Address" (if CPTO 1.16(i)).
 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively:
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
 3. "Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

Raymond Eich
Joe Hulett
David Dockter

4. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type):
 PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Chevron Phillips Chemical Company, LP The Woodlands, TX

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

5a. The following fee(s) are enclosed.

4b. Payment of Fee(s):

Issue Fee
 Publication Fee (No small entity discount permitted)
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 A check in the amount of the fees is enclosed. Payment by credit card Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1629. (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

 a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature:

Typed or printed name: David W. Dockter

Date 3/6/2006

Registration No. 55,120

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